

## 2007 Annual Hospital Staffing Report

**Hospital Name:** Kent Hospital

**Number of Licensed Beds:** 359

**Number of Staffed Beds:** 290

**Number of Units in Report:** 12

**Time Period Reflected in Report:** **From:** \_\_October, 2006\_\_ **To:** \_\_Present\_\_(January, 2007)\_\_\_\_\_

**Name of Person Completing Report:** Fran Falsey

**Title of Person Completing Report:** Director of Finance for Patient Care Services

**CEO Signature:**

**Date:** January 31, 2007

Mark Crevier

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> ECCU - 2 West		<b>Specialty Service (i.e., orthopedics, oncology):</b> Med / Surg, Telemetry		<b># of Telemetry Beds:</b> 39
<b>Type of Unit:</b> (Check all that apply)			<b>Age Group:</b> (Check all that apply)	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit <input checked="" type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Pediatric <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>34</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
<b>RNs</b>	<b>8 hours</b>	<b>9.00</b>	<b>9.00</b>	<b>7.00</b>
<b>LPNs</b>	<b>8 hours</b>			
<b>CNAs</b>	<b>8 hours</b>	<b>5.00</b>	<b>5.00</b>	<b>2.00</b>
<b>Other (Specify):</b>	<b>8 hours</b>			
	<b>8 hours</b>			
<b>Total Direct Care Providers:</b>		<b>14.00</b>	<b>14.00</b>	<b>9.00</b>
<b>Comments:</b> Patient mix requires ratio of 1:4 or 1:5, dependent upon acuity.				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> 3 South		<b>Specialty Service (i.e., orthopedics, oncology):</b> Med/Surg-Oncology		<b># of Telemetry Beds:</b> - 0 -
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit  <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit  <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit  <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult  <input type="checkbox"/> Pediatric  <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>34</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	8 hours	8.00	8.00	5.00
LPNs	8 hours			
CNAs	8 hours	4.00	4.00	3.00
<b>Other (Specify):</b>	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		<b>12.00</b>	<b>12.00</b>	<b>8.00</b>
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> 3 North		<b>Specialty Service (i.e., orthopedics, oncology):</b> Med / Surg - Pedi		<b># of Telemetry Beds:</b> - 0 -
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult <input checked="" type="checkbox"/> Pediatric <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>23</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
<b>RNs</b>	<b>8 hours</b>	<b>5.00</b>	<b>5.00</b>	<b>3.00</b>
<b>LPNs</b>	<b>8 hours</b>			
<b>CNAs</b>	<b>8 hours</b>	<b>3.00</b>	<b>3.00</b>	<b>2.00</b>
<b>Other (Specify):</b>	<b>8 hours</b>			
	<b>8 hours</b>			
<b>Total Direct Care Providers:</b>		<b>8.00</b>	<b>8.00</b>	<b>5.00</b>
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Intensive Care Unit		<b>Specialty Service (i.e., orthopedics, oncology):</b> Medical / Surgical Intensive Care		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input checked="" type="checkbox"/> <b>Critical Care/ Intensive Care Unit</b> <input type="checkbox"/> <b>Psychiatric Unit</b>  <input type="checkbox"/> <b>Step-Down/ Intermediate Care Unit</b> <input type="checkbox"/> <b>Rehabilitation Unit</b>  <input type="checkbox"/> <b>General Medical/Surgical Unit</b> <input type="checkbox"/> <b>Transitional Care Unit</b>  <input type="checkbox"/> <b>Obstetrical Unit/ Nursery</b> <input type="checkbox"/> <b>Emergency Department</b>			<input checked="" type="checkbox"/> <b>Adult</b>  <input type="checkbox"/> <b>Pediatric</b>  <input type="checkbox"/> <b>Newborn</b>	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>14</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
<b>RNs</b>	<b>8 hours</b>	<b>9.00</b>	<b>9.00</b>	<b>9.00</b>
<b>LPNs</b>	<b>8 hours</b>			
<b>CNAs</b>	<b>8 hours</b>	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>
<b>Other (Specify):</b>	<b>8 hours</b>			
	<b>8 hours</b>			
<b>Total Direct Care Providers:</b>		<b>10.00</b>	<b>10.00</b>	<b>10.00</b>
<b>Comments:</b>  Staff to accommodate the Rapid Response Team (RRT) is included in this staffing complement. All beds are centrally monitored beds.				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Intermediate Care Unit		<b>Specialty Service (i.e., orthopedics, oncology):</b> Critical Care Step-down		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit <input checked="" type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Pediatric <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>5</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
<b>RNs</b>	<b>8 hours</b>	<b>2.00</b>	<b>2.00</b>	<b>2.00</b>
<b>LPNs</b>	<b>8 hours</b>			
<b>CNAs</b>	<b>8 hours</b>			
<b>Other (Specify):</b>	<b>8 hours</b>			
	<b>8 hours</b>			
<b>Total Direct Care Providers:</b>		<b>2.00</b>	<b>2.00</b>	<b>2.00</b>
<b>Comments:</b> All beds are centrally monitored beds.				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Psychiatric Care Unit (PCU)		<b>Specialty Service (i.e., orthopedics, oncology):</b> Behavioral Health		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> (Check all that apply)			<b>Age Group:</b> (Check all that apply)	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input checked="" type="checkbox"/> Psychiatric Unit <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Pediatric <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>8</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	8 hours	2.00	2.00	1.00
LPNs	8 hours			1.00
CNAs	8 hours	1.00	1.00	
<b>Other (Specify):</b>	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		<b>3.00</b>	<b>3.00</b>	<b>2.00</b>
<b>Comments:</b>          				

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<b>Patient Care Unit Name:</b> 4 West		<b>Specialty Service (i.e., orthopedics, oncology):</b> Med / Surg - Orthopedics		<b># of Telemetry Beds:</b> 6
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit  <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit  <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit  <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult  <input type="checkbox"/> Pediatric  <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>26</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
<b>RNs</b>	<b>8 hours</b>	<b>6.00</b>	<b>6.00</b>	<b>4.00</b>
<b>LPNs</b>	<b>8 hours</b>			
<b>CNAs</b>	<b>8 hours</b>	<b>3.00</b>	<b>3.00</b>	<b>2.00</b>
<b>Other (Specify):</b>	<b>8 hours</b>			
	<b>8 hours</b>			
<b>Total Direct Care Providers:</b>		<b>9.00</b>	<b>9.00</b>	<b>6.00</b>
<b>Comments:</b>				



### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> 5 West	<b>Specialty Service (i.e., orthopedics, oncology):</b> Med / Surg - Neuro	<b># of Telemetry Beds:</b> 6
<b>Type of Unit:</b> (Check all that apply)		<b>Age Group:</b> (Check all that apply)
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department		<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Pediatric <input type="checkbox"/> Newborn
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b> 26		
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>		
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>
		<b>Days                  Evenings                  Nights</b>
RNs	8 hours	6.00                  6.00                  4.00
LPNs	8 hours	
CNAs	8 hours	3.00                  3.00                  2.00
Other (Specify):	8 hours	
	8 hours	
<b>Total Direct Care Providers:</b>		9.00                  9.00                  6.00
<b>Comments:</b>		

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Northwest	4	<b>Specialty Service (i.e., orthopedics, oncology):</b> Med/Surg - Isolation	<b># of Telemetry Beds:</b>	
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit  <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit  <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit  <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult  <input type="checkbox"/> Pediatric  <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>23</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	8 hours	7.00	5.00	3.00
LPNs	8 hours			
CNAs	8 hours	3.00	2.00	2.00
Other (Specify):	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		<b>10.00</b>	<b>7.00</b>	<b>5.00</b>
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> 4 South		<b>Specialty Service (i.e., orthopedics, oncology):</b> Rehab		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> <b>Critical Care/ Intensive Care Unit</b> <input type="checkbox"/> <b>Psychiatric Unit</b>  <input type="checkbox"/> <b>Step-Down/ Intermediate Care Unit</b> <input checked="" type="checkbox"/> <b>Rehabilitation Unit</b>  <input type="checkbox"/> <b>General Medical/Surgical Unit</b> <input type="checkbox"/> <b>Transitional Care Unit</b>  <input type="checkbox"/> <b>Obstetrical Unit/ Nursery</b> <input type="checkbox"/> <b>Emergency Department</b>			<input checked="" type="checkbox"/> <b>Adult</b>  <input type="checkbox"/> <b>Pediatric</b>  <input type="checkbox"/> <b>Newborn</b>	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>15</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	8 hours	3.00	2.00	1.00
LPNs	8 hours	1.00	1.00	1.00
CNAs	8 hours	1.00	1.00	1.00
<b>Other (Specify):</b>	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		<b>5.00</b>	<b>4.00</b>	<b>3.00</b>
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> 3 West - Women's Care		<b>Specialty Service (i.e., orthopedics, oncology):</b> Med/Surg - Antepartum		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> (Check all that apply)			<b>Age Group:</b> (Check all that apply)	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit  <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit  <input checked="" type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit  <input checked="" type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult  <input type="checkbox"/> Pediatric  <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>10</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
<b>RNs</b>	<b>8 hours</b>	<b>4.00</b>	<b>3.00</b>	<b>3.00</b>
<b>LPNs</b>	<b>8 hours</b>			
<b>CNAs</b>	<b>8 hours</b>	<b>1.00</b>	<b>1.00</b>	
<b>Other (Specify):</b> Lactation Cons/Family Educator	<b>8 hours</b>	<b>1.60</b>	<b>1.60</b>	<b>1.60</b>
	<b>8 hours</b>			
<b>Total Direct Care Providers:</b>		<b>6.60</b>	<b>5.60</b>	<b>4.60</b>
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Nursery		<b>Specialty Service (i.e., orthopedics, oncology):</b> Nursery/Level II		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> <i>(Check all that apply)</i>			<b>Age Group:</b> <i>(Check all that apply)</i>	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input checked="" type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input type="checkbox"/> Adult  <input type="checkbox"/> Pediatric  <input checked="" type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				<b>12</b>
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	8 hours	3.50	3.00	3.00
LPNs	8 hours			
CNAs	8 hours	0.50		
Other (Specify):	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		<b>4.00</b>	<b>3.00</b>	<b>3.00</b>
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Labor and Delivery		<b>Specialty Service (i.e., orthopedics, oncology):</b>		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> (Check all that apply)			<b>Age Group:</b> (Check all that apply)	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit <input type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit <input type="checkbox"/> Obstetrical Unit/ Nursery <input type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult <input type="checkbox"/> Pediatric <input type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				3.1 avg del / day
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	8 hours	5.00	4.00	4.00
LPNs	8 hours			
CNAs	8 hours			
Other (Specify):	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		5.00	4.00	4.00
<b>Comments:</b>				

### 2007 Annual Staffing Report

<b>Patient Care Unit Name:</b> Emergency Department		<b>Specialty Service (i.e., orthopedics, oncology):</b> Emergency Services		<b># of Telemetry Beds:</b>
<b>Type of Unit:</b> (Check all that apply)			<b>Age Group:</b> (Check all that apply)	
<input type="checkbox"/> Critical Care/ Intensive Care Unit <input type="checkbox"/> Psychiatric Unit  <input type="checkbox"/> Step-Down/ Intermediate Care Unit <input type="checkbox"/> Rehabilitation Unit  <input type="checkbox"/> General Medical/Surgical Unit <input type="checkbox"/> Transitional Care Unit  <input type="checkbox"/> Obstetrical Unit/ Nursery <input checked="" type="checkbox"/> Emergency Department			<input checked="" type="checkbox"/> Adult  <input checked="" type="checkbox"/> Pediatric  <input checked="" type="checkbox"/> Newborn	
<b>Number of patients upon which staffing plan is based (Average Daily Census):</b>				
<b>Emergency Department = Average number of visits per day (Total Visits/365 days):</b>				<b>169</b>
<b>Position</b>	<b>Shift Length</b>	<b>Number of Staff Ordinarily Assigned</b>		
		<b>Days</b>	<b>Evenings</b>	<b>Nights</b>
RNs	1st 4 hrs	10.00	15.00	14.00
	2nd 4 hrs	15.00	15.00	10.00
LPNs	8 hours			
CNAs	8 hours	3.00	4.00	3.00
Other (Specify):	8 hours			
	8 hours			
<b>Total Direct Care Providers:</b>		<b>15.50</b>	<b>19.00</b>	<b>15.00</b>
<b>Comments:</b>				
Staff are scheduled on staggered shifts to accommodate volume at peak times.				